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Application # 09/361,619

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**TRANSMITTAL
FORM**

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Total Number of Pages in This Submission

Application Number 06/381,619
 Filing Date 07/27/99
 First Named Inventor Michel H. Kiehn
 Art Unit
 Examiner Name
 Attorney Docket Number API-1038-30-US-NP

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 Statement under 37 CFR 3.73 (b).

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name Robert Yoshida
 Signature *Robert Yoshida*
 Printed name Robert Yoshida
 Date Reg. No. 54, 841

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PTO/SA/81 (11-04)

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**POWER OF ATTORNEY
and
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INDICATION FORM**

Application Number	09/361,619
Filing Date	07/27/1999
First Named Inventor	Michel H. Klein
Title	Protective Recombinant Haemophilus
Art Unit	
Examiner Name	
Attorney Docket Number	API-1038-30-US-NP

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

☐ Practitioners associated with the Customer Number:

OR

☐ Practitioner(s) named below:

Name	Registration Number
Robert Yoshida	54,941
Thomas Bordner	47,436
Patrick J. Halloran	41,053
G. Kenneth Smith	43,135

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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I am the:

☐ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SA/96)

SIGNATURE of Applicant or Assignee of Record

Signature

Date

Name

John E. Parrish

Telephone

570-839-4509

Title and Company

V.P. of Intellectual Property

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of forms are submitted.

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**REVOCATION OF POWER OF
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AND
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Application Number	09/361,619
Filing Date	07/27/1999
First Named Inventor	Michel H. Klein
Art Unit	
Examiner Name	
Attorney Docket Number	APL-1038-30-US-NP

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☐ I hereby appoint the practitioners associated with the Customer Number:

☒ Please change the correspondence address for the above-identified application to:

☐ The address associated with
Customer Number:

OR

☐ Firm or
Individual Name

Aventis Pasteur

Address

1 Discovery Drive
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18370

Country

United States

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570-895-2528

Fax

570-895-2702

I am the:

☐ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature

Name

John E. Parrish

Date

2 December 2004

Telephone

570-839-4509

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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PTO/S&S (09-04)

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STATEMENT UNDER 37 CFR 3.73(b)Applicant/Patent Owner: Aventis Pasteur LimitedApplication No./Patent No.: 09/361,619 Filed/Issue Date: 07/27/1999Entitled: Protective Recombinant Haemophilus Influenzae High Molecular Weight ProteinsAventis Pasteur Limited
(Name of Assignee)Corporation
(Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. ☐ the assignee of the entire right, title, and interest; or2. ☐ an assignee of less than the entire right, title and interest.
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in the patent application/patent identified above by virtue of either:

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[NOTE: A separate copy (i.e., a true copy of the original assignment document(s)) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

John E. Parrish

Signature

Printed or Typed Name

V.P. of Intellectual Property

Title

Date

570-895-4509

Telephone Number

This collection of information is required by 37 CFR 3.73(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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